

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND												
1 Date of Request: _____		2 Serial/Patent # <b>10524332</b>										
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
	Filing			\$								
	Amendment			\$								
	Extension of Time			\$								
	Notice of Appeal/Appeal			\$								
	Petition			\$								
	Issue			\$								
	Cert of Correction/Terminal Disc.			\$								
	Maintenance			\$								
	Assignment			\$								
	Other			\$								
		7 TOTAL AMOUNT OF REFUND		\$								
		8 TO BE REFUNDED BY:										
		Treasury Check										
		Credit Deposit A/C #:										
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>										
10 REASON:												
	Overpayment											
	Duplicate Payment											
	No Fee Due (Explanation):											
02 FC. 1632 500CR Adjustment Date: 06/03/2005 P. Kidwell												
11 REFUND REQUESTED BY: 02/22/2005 Grey 1.00000000 132490 10524332												
TYPED/PRINTED NAME: 02 FC. 1632		TITLE: 500CR										
SIGNATURE: _____		<div style="text-align: right; font-size: small;"> <b>PHONE:</b> 800.899.6132 132490 10524332  <b>Date Ref:</b> 06/03/2005 <b>DATE:</b> 132490 10524332  <b>BY:</b> 1642 400.00 DA </div>										
OFFICE: _____												
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****												
APPROVED: _____		DATE: _____										

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*